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## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:   Practitioners associated with the Customer Number: 22428   OR	I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).								
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):    Name									
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):    Name	☑ Practitioners associated with the Customer Number: 22428								
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    The address associated with Customer Number: 22428	OR								
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    The address associated with Customer Number: 22428  OR   Firm or individual Name		Name			Name				
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☐ The address associated with Customer Number: 22428  OR     ☐ Firm or Individual Name  Address  City State Zip  Country  Telephone Fax  Assignee Name and Address:  BEHR GmbH & CO., KG  Mauserstrasse 3  D-70489 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Company Name BEHR GmbH & CO., KG	connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment								
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City State Zip  Country  Telephone Fax  Assignee Name and Addreas:  BEHR GmbH & CO., KG Mauserstrasse 3 D-70469 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee.  Company Name BEHR GmbH & CO., KG		ssociated with Customer	Number: 22428						
City State Zip  Country  Telephone Fax  Assignee Name and Addreas:  BEHR GmbH & CO., KG Mauserstrasse 3 D-70469 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  Signature of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Company Name BEHR GmbH & CO., KG  Name Andreas Grauel	OR								
Country  Telephone Fax  Assignee Name and Address:  BEHR GmbH & CO., KG Mauserstrasse 3 D-70489 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/86 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Company Name BEHR GmbH & CO., KG	Firm or Individu	ai Name							
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Assignee Name and Address:  BEHR GmbH & CO., KG Mauserstrasse 3 D-70469 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  Signature and title is supplied below is authorized to act on behalf of the assignee  Company Name  BEHR GmbH & CO., KG  Name  And pas Grauel	City			State	Zip				
Assignee Name and Address:  BEHR GmbH & CO., KG Mauserstrasse 3 D-70469 Stuttgart, Federal Republic of Germany  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Company Name  BEHR GmbH & CO., KG	Country								
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The individual whose signature and title is supplied below is authorized to act on behalf of the assignce  Company Name BEHR GmbH & CO., KG  Name Andreas Grauel	Mauserstrasse 3 D-70469 Stuttgar	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Name Andreas Grauel	D-70469 Stuttgar A copy of this is required to be be completed to	orm, together with a filed in each application of the practition	on in which this fo ners appointed in	orm is used. The this form if the	e statement under 3 appointed practition	7 CFR 3.73(b) may ner is authorized to			
	D-70469 Stuttgar A copy of this is required to be be completed to	form, together with a filed in each application by one of the practition of the assignee, and m	on in which this finers appointed in ust identify the a SIGNATURE of A	orm is used. The this form if the opplication in whas signed of Records.	e statement under 3 appointed practition Ich this Power of At	7 CFR 3.73(b) may ner is authorized to torney is to be filed.			
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signature   Nugust Us, 2005	D-70469 Stuttgar A copy of this required to be be completed to act on behalf o	form, together with a silled in each application one of the practition of the assignee, and much middle individual whose signation of the individual whose signation of the midvidual whose signation	on in which this finers appointed in ust identify the au SIGNATURE of A ture and title is supplie	orm is used. The this form if the opplication in whas signed of Records.	e statement under 3 appointed practition Ich this Power of At	7 CFR 3.73(b) may ner is authorized to torney is to be filed.			
Title Director Intell.Prop. Telephone 0049-711-896-2891	D-70469 Stuttgar A copy of this required to be be completed to act on behalf o	form, together with a silled in each application one of the practition of the assignee, and much middle individual whose signation of the individual whose signation of the midvidual whose signation	on in which this finers appointed in ust identify the au SIGNATURE of A ture and title is supplie	orm is used. The this form if the opplication in whas signed of Records.	e statement under 3 appointed practition Ich this Power of At	7 CFR 3.73(b) may ner is authorized to torney is to be filed.			

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents**, P.O. Box 1450, Alexandria, VA 22313-1450.

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		STATEMENT UNDE	R 37 CFR 3.73(b)	
Applic	ant/Patent Owner:	Sinan BALCI et al.		
Applic	eation No.:	10/587,357	Filed:	2/2/2005
Paten	t No.:		Issue Date:	
Docke	et Number:	016906-0534		
Entitle	ed:	METAL SIDE-PLATE FOR A R	ADIATOR	
	EHR GmbH & CO. KG		Corporation	
(N	ame of Assignee)		(Type of Assignee, government agency	e.g., corporation, partnership, university, r, etc.)
states	that it is:			
1.	★ the assignee of the er	tire right, title, and interest; or		
2.		an the entire right, title, and intere tage) of its ownership interest is		
in the	patent application/patent ident	ified above by virtue of either:		
A. □ <i>OR</i> _	An assignment from the inver	tor(s) of the patent application/pa	atent identified above. A co	opy of the assignment is attached.
В. ⊠	A chain of title from the inven	or(s), of the patent application/pa	atent identified above, to th	ne current assignee as shown below:
	Reel <u>018397</u> , Frame _  2. From: The document was reco	ded in the United States Patent a  0339 , or for which a copy there  To:  ded in the United States Patent a  or which a copy thereof is attache	eof is attached.	
	Reel, Frame, or f	To: ded in the United States Patent a or which a copy thereof is attache the chain of title are listed on a si	ed.	
<u>[N</u>	opies of assignments or other OTE: A separate copy (i.e., a	documents in the chain of title are true copy of the original documer if the assignment is to be recorde	e attached. nt(s)) must be submitted to	
The u		olied below) is authorized to act o	0	ICT 2.6 2000
	Signatu	re		Date
	Richard L. S	chwaab	(20	2) 672-5414
	Printed or Typ	ed Name	Telep	phone Number
	Attorney for A	pplicant		
	Title	•		

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.